

The following CPT codes will be reimbursed at a rate not to exceed the amounts listed below.

Code	Code Description	Reimbursement Rate
80055	OBSTETRIC PROFILE	\$33.03
86850	RBC ANTIBODY SCREEN	\$7.93
86860	RBC ANTIBODY SCREEN	\$19.83
86870	RBC ANTIBODY IDENTIFICATION	\$16.52
86901	BLOOD TYPING, RH(D)	\$4.63
86945	BLOOD PRODUCT/IRRADIATION	\$21.88
86970	PRETREATMENT RBC, DRUGS	\$15.03
86971	PRETREATMENT RBC, DILUTION	\$15.03
86975	PRETREATMENT SERUM, DRUGS	\$14.48
86976	RBC PRETREATMENT, SERUM	\$14.48
86977	RBC PRETREATMENT, SERUM	\$14.48
86978	RBC PRETREATMENT, SERUM	\$17.37
Z2004	SURGICAL PATHOLOGY, GR/MX, ABORTION DERIVED TIS	\$26.34
Z2500	NEWBORN SCREENING TESTS FOR PKU	\$59.00